

**CLAIMS ONLY**

SERIAL NO.

FILING DATE

**APPLICANT(S)**

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**CLAIMS**

	AS FILED		AFTER, 1st AMENDMENT		AFTER 2nd AMENDMEN	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS